

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

**NOTICE OF FILING / CLAIM FEE(S) DUE**  
**(CALCULATION SHEET)**

APPLICATION NUMBER: \_\_\_\_\_

**Total Fee Calculation**


|                                     | Fee Code | Total<br># Claims | Number<br>Extra | X         | Fee         | Fee        | = | Total         |
|-------------------------------------|----------|-------------------|-----------------|-----------|-------------|------------|---|---------------|
|                                     | Sm./Lg.  |                   |                 |           | Sm. Entity  | Lg. Entity |   |               |
| Basic Filing Fee                    | 201/101  |                   |                 |           | <u>345</u>  | <u>690</u> | = | <u>690</u>    |
| Total Claims >20                    | 203/103  | <u>90</u>         | -20 =           | <u>70</u> | X <u>9</u>  | <u>18</u>  | = | <u>1260</u>   |
| Independent Claims >3               | 202/102  | <u>9</u>          | -3 =            | <u>6</u>  | X <u>39</u> | <u>78</u>  | = | <u>468</u>    |
| Mult. Dep Claim Present             | 204/104  |                   |                 |           | <u>130</u>  | <u>260</u> | = | <u>      </u> |
| Surcharge                           | 205/105  |                   |                 |           | <u>65</u>   | <u>130</u> | = | <u>130</u>    |
| English Translation                 | 139      |                   |                 |           |             |            | = | <u>      </u> |
| <b><u>TOTAL FEE CALCULATION</u></b> |          |                   |                 |           |             |            |   | <u>2548</u>   |

Fees due upon filing the application:

Total Filing Fees Due = \$ 2548

Less Filing Fees Submitted - \$ \_\_\_\_\_

**BALANCE DUE** = \$ \_\_\_\_\_

  
Office of Initial Patent Examination

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective December 29, 1999

Application or Docket Number

**CLAIMS AS FILED - PART I**

(Column 1)

(Column 2)

|                                  |                 |              |
|----------------------------------|-----------------|--------------|
| FOR                              | NUMBER FILED    | NUMBER EXTRA |
| BASIC FEE                        |                 |              |
| TOTAL CLAIMS                     | 90 minus 20 = * | 70           |
| INDEPENDENT CLAIMS               | 9 minus 3 = *   | 6            |
| MULTIPLE DEPENDENT CLAIM PRESENT |                 |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2)

(Column 3)

|             |  |                                  |       |                                    |               |
|-------------|--|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT A |  | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total  | *                                | Minus | **                                 | =             |
|             | Independent                                    | *                                | Minus | ***                                | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    |               |

(Column 1)

(Column 2)

(Column 3)

|             |  |                                  |       |                                    |               |
|-------------|--|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT B |  | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total  | *                                | Minus | **                                 | =             |
|             | Independent                                    | *                                | Minus | ***                                | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    |               |

(Column 1)

(Column 2)

(Column 3)

|             |  |                                  |       |                                    |               |
|-------------|--|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT C |  | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total  | *                                | Minus | **                                 | =             |
|             | Independent                                    | *                                | Minus | ***                                | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    |               |

**SMALL ENTITY TYPE** ☐

OR

**OTHER THAN SMALL ENTITY**

|        |        |    |        |        |
|--------|--------|----|--------|--------|
| RATE   | FEE    |    | RATE   | FEE    |
|        | 345.00 | OR |        | 690.00 |
| X\$ 9= |        | OR | X\$18= | 1260   |
| X39=   |        | OR | X78=   | 468    |
| +130=  |        | OR | +260=  |        |
| TOTAL  |        | OR | TOTAL  | 2418   |

**SMALL ENTITY**

OR

**OTHER THAN SMALL ENTITY**

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
| X\$ 9=           |                | OR | X\$18=           |                |
| X39=             |                | OR | X78=             |                |
| +130=            |                | OR | +260=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
| X\$ 9=           |                | OR | X\$18=           |                |
| X39=             |                | OR | X78=             |                |
| +130=            |                | OR | +260=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
| X\$ 9=           |                | OR | X\$18=           |                |
| X39=             |                | OR | X78=             |                |
| +130=            |                | OR | +260=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.